



UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE
United States Patent and Trademark Office
Address: COMMISSIONER FOR PATENTS
P.O. Box 1450
Alexandria, Virginia 22313-1450
www.uspto.gov

BIBDATASHEET

CONFIRMATION NO. 3700

Bib Data Sheet

SERIAL NUMBER 09/501,328	FILING DATE 02/09/2000 RULE	CLASS 424	GROUP ART UNIT 1645	ATTORNEY DOCKET NO. 7011-0032
-----------------------------	---------------------------------------	--------------	------------------------	-------------------------------------

APPLICANTS

Michael D. Macklin, Madison, WI;

Deborah L. Fuller, Madison, WI;

** CONTINUING DATA *****

This appln claims benefit of 60/119,515 02/09/1999
and claims benefit of 60/161,699 10/26/1999

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 04/11/2000

Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature <i>mg</i> Initials	STATE OR COUNTRY WI	SHEETS DRAWING 17	TOTAL CLAIMS 55	INDEPENDENT CLAIMS 4
--	--	-------------------------------	-----------------------------	---------------------------	--------------------------------

ADDRESS

22428
FOLEY AND LARDNER
SUITE 500
3000 K STREET NW
WASHINGTON, DC
20007

TITLE

Mycobacterium tuberculosis immunization

FILING FEE RECEIVED 1914	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
------------------------------------	---	--